U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

For Official Use Only

## FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

AUG 1 1 2005

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 er 440.

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	READ THE INSTRUCTIONS CAREFU	LY BEFORE PREPARING THIS REPORT.		
E				
1. File Number U - 5592		2. Fiscal Year Covered From:		
		1 / 1 / 2004 Through: 12 / 31 / 2004		
3. Name and address of perso	n filing.	4. Name, file number, and address of labor organization.		
Name Matthew		Name Int. Fed. of Professional & Tech. Engineers		
		Labor Organization File Number 000-069		
P.O. Box, Bldg., Room No., if any		P.O. Box, Building and Room Number, if any		
Street 8630 Fenton Street, Suite 400		Street 8630 Fenton Street, Suite 400		
City Silver Spring		City Silver Spring		
State Maryland	ZIP Code + 4 20910	State Maryland ZIP Code + 4 20910		
monetary value <b>from an e</b> n	ged in transactions (including loans) with, on ployer whose employees your organization organization (including trade name, if any).	derived income or other economic benefit of tion represents or is actively seeking to represent.  7.a. Nature of Interest, Transaction, or Income.		
Name	yer (motuming trade mante, in any).			
Trade Name, if any:				
frage warne, it any.				
P.O. Box, Bldg., Room No.,	if any	7.b. Amount.		
Street				
City				
State	ZIP Code + 4			
	Si	gnature		
authoritiand in this rapart (inc	tion. The undersigned declares, under penalty luding the information contained in any accompa and belief, true, correct, and complete. (See the	of Perjury and other applicable penalties of the law, that all of the information nying documents), has been examined by the signatory and is, to the best of the section on penalties in the instructions.)		
Signed Mr.	A	On 08/12/2005 (301) 565-9016		
		Date Telephone Number		

Name of Person Filing Matthew Biggs	3	File Number U-		
B. Held an interest in or derived income or esubstantial part of which consists of buying of an employer whose employees your labo (2) any part of which consists of buying from dealing with your labor organization or with	from, selling or leasing to, or othe r organization represents or is act nor selling or leasing directly or in	wise dealing with the business ively seeking to represent, or directly to, or otherwise		
8. Name and address of Business (including to	trade name, if any).	9. Business deals with:		
Name Kelly Press, Inc		processor.		
Trade Name, if any:		a. Labor Organization		
P.O. Box, Bldg., Room No., if any		b. Trust  c. Employer		
Street 1701 Cabin Branch Drive				
City Cheverly				
State Maryland	ZIP Code + 4 20785			
10. If 9.b. or 9.c. is checked give trust or employer's name.		11.a. Nature of such dealing.		
Name		Printing services for union publications, stationary		
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any				
Street		11.b. Approximate dollar value of such dealing.  12.a. Nature of interest held or income received.		
City				
State	ZIP Code + 4	Food and Beverages (Dinner Meet	ing on 3/10/2004)	
		The second secon		
		7 O		
			WAS AND OF THE PROPERTY OF THE	
		12.b. Amount.		
		12.0. Amount.	\$50	
C. Received from any employer (other or from any labor relations consultant to an	than an employer covered unde employer any payment of money	er parts A and B above) or other thing of value.		
13.a. Name and address of Employer or Labo (including trade name, if any).	r Relations Consultant	14.a. Nature of payment.		
Name				
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any				
Street				
City				
State	ZIP Code + 4			
13.b. Is the Business an Employer	or Consultant ?	14.b. Amount of payment.		

Name of Person Filing Matthew Biggs	File Number U-

## Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including t	trade name, if any).	9. Business deals with:		
Name Kelly Press, Inc		2 Labor Organization		
Trade Name, if any:		a. Labor Organization		
P.O. Box, Bldg., Room No., if any		b. Trust		
Street 1701 Cabin Branch Drive		c. Employer		
City Cheverly				
State Maryland ZIF	P Code + 4 10785			
10. If 9.b. or 9.c. is checked give trust or employe	er's name.	11.a. Nature of such dealing.		
Name		Printing Services for Union Publications, Staitionary		
Trade Name, if any:			THE THE LEGISLATION OF THE PARTY OF THE PART	
P.O. Box, Bldg., Room No., if any				
Street				
State	P Code + 4	11.b. Approximate dollar value of such dealing.		
		12.a. Nature of interest held or income received.		
		Food and Beverages (Dinner Meeting	on 2/24/04)	
			Aconomical	
			an east residential for	
			**************************************	
			**************************************	
		d Date of Contract Co	Section His Novolon	
		12.b. Amount.	\$40	